

## **PAYMENT POLICY, FINANCIAL ARRANGEMENTS & MEDICAL INSURANCE**

On behalf of Shanbom Eye Specialist, we are sincerely committed to providing you with the highest standards of care possible. If you have medical insurance, we will strive to help you receive your maximum allowable benefits. In order to achieve these goals, we need your assistance and your understanding of our payment requirements.

Payment/co-payments for services are collected at the time services are rendered. For your convenience, we accept cash, check and most major credit cards. Returned checks are subject to a **\$20.00** banking fee. There is a refraction fee of **\$40.00** (for a prescription for glasses) that is not covered by Medicare.

There are thousands of medical insurance plans in the Metropolitan area. There are deductibles, co-payments, yearly maximums and other restrictions of which you must be aware. Your employer's Benefits Representative should be able to provide you with the details of your specific plan. You are entitled to the maximum benefits offered under your insurance contract; however, you are ultimately responsible for all expenses incurred in our office. Treatment is determined by patient need(s) rather than by insurance parameters.

**We will attempt to bill your insurance carrier. You will be billed for any co-payments, deductibles or non-covered services. You have made a contract with your insurance carrier. We take NO responsibility for any services denied by your medical insurance carrier.**

**If you have questions regarding our payment policy or required further clarification, please do not hesitate to ask.**

Patient Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness: \_\_\_\_\_ Date: \_\_\_\_\_

**Note: There will be an additional 35% finance fee applied to your outstanding balance if we cannot collect payment in a timely manner and are forced to turn your account over to a collection service!**